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THE LAW OFFICES OF  
**ANDREW D. FORTNEY, PH.D., P.C.**401 W. FALLBROOK AVENUE, SUITE 204  
FRESNO, CALIFORNIA 93711

WWW.FORTNEYLAW.COM

TELEPHONE: (559) 432-6847

FAX: (559) 432-6872

EMAIL: INFO@FORTNEYLAW.COM

ANDREW D. FORTNEY, PH.D.

ALEC B. PLUMB

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COMPANY: COMMISSIONER FOR PATENTS / P.O. Box 1450, ALEXANDRIA VA 22313-1450

FAX: 1 (571) 273-8300

DATE: 06-18-2007

TIME: 4:00 AM/PM

- ☐ WITH CONFIRMATION  
☒ WITHOUT CONFIRMATION

RE: APPLICATION NO. 10/750,248  
FILED: December 31, 2003

I hereby certify that this document and all documents listed below are being transmitted via facsimile to  
Commissioner for Patents, fax no. (571) 273-8300, on June 18, 2007.

By:   
Jennie Heaton

## SUBMITTED HERewith FOR THE ABOVE-CAPTIONED APPLICATION:

- Transmittal Form
- Fee Transmittal
- Credit Card Payment Form
- Petition for Extension of Time
- Request for Continued Examination Transmittal

Respectfully submitted,



Andrew D. Fortney, Ph.D.; Reg. No. 34,600

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PTO/SB/21 (07-08)

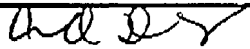
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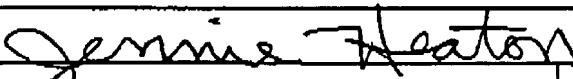
<b>TRANSMITTAL FORM</b>	Application Number	10/750,248	<b>RECEIVED CENTRAL FAX CENTER JUN 18 2007</b>
	Filing Date	December 31, 2003	
	First Named Inventor	Sang Woo NAM	
	Art Unit	1751	
	Examiner Name	Webb, Gregory E.	
(to be used for all correspondence after initial filing)		Attorney Docket Number	PIA31180/DBE/US
Total Number of Pages in This Submission		6	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Fax Transmission Cover Page - Credit Card Payment Form - Request for Continued Examination
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	The Law Offices of Andrew D. Fortney, Ph.D., P.C.		
Signature			
Printed name	Andrew D. Fortney, Ph.D.		
Date	06-18-2007	Reg. No.	34,600

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Jennie Heaton	Date	06-18-2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.

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PTO/SB/17 (07-08)

Approved for use through 01/31/2007, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1120

**Complete if Known**

Application Number	10/750,248
Filing Date	December 31, 2003
First Named Inventor	Sang Woo NAM
Examiner Name	Webb, Gregory E.
Art Unit	1751
Attorney Docket No.	PIA31180/DBE/US

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JUN 18 2007

**METHOD OF PAYMENT (check all that apply)**☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☐ Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)

Small Entity Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

Multiple dependent claims

200

100

360

180

Total Claims Extra Claims Fee (\$)

- 20 or HP = 0 x = 0

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$)

- 3 or HP = 0 x = 0

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x = Fee Paid (\$)

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): Petition for 2-month Ext. of Time (\$450) and Request for Continued Exam. (\$750) [Less 1-Month previously Paid]

\*1120 [Less 1-Month previously Paid]

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	34,600	Telephone	559-432-6847
Name (Print/Type)	Andrew D. Fortney, Ph.D.	Date	06-18-2007		

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